

**U.S. Army Child Development Services  
Infant Sleep Position Information**

**The American Academy of Pediatrics defines Sudden Infant Death Syndrome (SIDS) as the sudden and unexplained death of an infant under one year of age, SIDS, sometimes known as crib death, strikes nearly 3,000 babies in the U.S. every year. The death is sudden and unpredictable. In most cases, the baby seems healthy.**

**The American Academy of Pediatrics says that one of the most important things to help reduce the risk of SIDS is to put health babies on their backs to sleep. This is done when a baby is being put down for a nap, rest, or sleep for the night.**

**Between the ages of 6 months to 12 months, infants may begin to turn over on their own. Once this occurs, the recommendation is to let the infants assume their own sleep positions after first being placed on their backs to sleep.**

**A certain amount of “tummy time” *while the infant is awake and observed* is recommended for developmental reasons, and to help prevent flat spots on the back of the head. Tummy time is provided outside of the crib, e.g., in safe places where infants can listen, observe, and interact with others in their environment.**

**Infant sleeping areas in Child Development Centers and outreach childcare settings such as Short Term Alternative Childcare (STACC) sites are to be well lighted and co-located with infant activity areas so that line of sight adult supervision is maintained. Separate and/or darkened rooms/crib areas are not authorized.**

**Family Childcare providers must be within sight or sound of infants at all times. Providers living in two-story housing units should nap infants on the ground floor or remain on the same floor while infants are sleeping. Providers should observe all children on a regular basis throughout nap/rest periods.**

**Use a firm crib mattress covered by a sheet.**

**Keep soft objects and loose bedding out of the crib (such as pillows, quilts, comforters, and stuffed toys).**

**Avoid overheating. The infant should be lightly clothes for sleep and the temperature should be comfortable to a lightly-clothed adult.**

**Encourage supervised “tummy time” out of the crib when infant is awake to ensure upper body muscle development.**

**Place the infant to sleep with the head to one side for a week and then change to the other side to help prevent misshaping of the head.**

**Avoid extensive time in car seat carriers or “bouncers” to ensure upper body muscle development.**

**In addition to the APP recommendations above, providers should:**

- **Avoid exposure of infants to second-hand smoke**
- **Avoid use of home monitors or commercially marketed “SIDS reducing devices” as a strategy to reduce the risk of SIDS. There is no evidence that the use of such products reduce the risk.**
- **Prohibit bed sharing or co-sleeping, e.g., on sofas or beds with other infants or adults. Do not place a baby on a waterbed, sofa, soft mattress, pillow, or other soft surface.**

**Special Note: Latest studies have reported that using a clean, dry pacifier when placing the infant down to sleep has a “protective effect” on the incidence of SIDS.**

**For more information on reducing the SIDS risk, contact the “Back to Sleep” campaign at the American Academy of Pediatrics at [www.aap.org](http://www.aap.org) or [www.nichd.nih.gov/sids/sids.cfm](http://www.nichd.nih.gov/sids/sids.cfm)**